



Commissioner for Patents  
Washington, DC 20231  
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Bib Data Sheet

CONFIRMATION NO. 1717

<b>SERIAL NUMBER</b> 09/726,971	<b>FILING DATE</b> 11/30/2000 <b>RULE</b>	<b>CLASS</b> 704	<b>GROUP ART UNIT</b> 2654	<b>ATTORNEY DOCKET NO.</b> Bell - 20	
<b>APPLICANTS</b> Craig L. Reding, Midland Park, NJ; Suzi Levas, Nanuet, NY;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/10/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Allowance</u> <u>Pr. try Br. and</u> <u>DB</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 32127					
<b>TITLE</b> Methods and apparatus for performing speech recognition and using speech recognition results					
<b>FILING FEE RECEIVED</b> 1050	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



## UNITED STATES PATENT AND TRADEMARK OFFICE

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<b>SERIAL NUMBER</b> 09/726,971	<b>FILING DATE</b> 11/30/2000 <b>RULE</b>	<b>CLASS</b> 704	<b>GROUP ART UNIT</b> 2641	<b>ATTORNEY DOCKET NO.</b> Bell - 20	
<b>APPLICANTS</b> Craig L. Reding, Midland Park, NJ; Suzi Levas, Nanuet, NY;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 01/10/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Christy Blant</i> <i>DB</i> Allowance Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> STRAUB & POKOTYLO Building 6 Suite 83 1 Bethany Road Hazlet, NJ 07730					
<b>TITLE</b> Methods and apparatus for performing speech recognition and using speech recognition results					
<b>FILING FEE RECEIVED</b> 1050	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		